SECRETARY OF THE SCHATE

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1/2

(See Reverse Side for Instructions)

1. NAME OF COMMITTEE IN	FULL		
Elizabeth Dole Committee, Inc.			
ADDRESS (number and str	eet)	- Y- 1 II	
PO Box 2918			·
CITY, STATE, and ZIP CO	DDE		
Raleigh	, NC	27602	
2. NAME OF CANDIDATE	**************************************	1/4	
Elizabeth Dole			
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